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**Dara L. Dinner** (Depositor's name)  
*[Signature]* (Signature)  
 26 November 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/689,483	10/12/2000	Kevin H. Storm	P32685	9497

TITLE OF INVENTION: METHOD OF TREATING A BACTERIAL INFECTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	12/05/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
BENNETT, RACHEL M	1615	424-468000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Dara L. Dinner  
 2 Stephen Venerianer  
 3 Charles M. Kinzig

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  
 (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY AND STATE OR COUNTRY)

**Beecham Pharmaceuticals (Pte) Limited** **Jurong, Singapore**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee  
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11/28/2003 AWONDAF2 00000027 192570 09689483  
 01 FC:1501 1330.00 DA  
 02 FC:8001 6.00 DA

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PTOL-85 (Rev. 08/03) Approved for use through 04/30/2004.

OMB 0651-0033

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